		PART B	- FEE(S) T	RANSMITTAL				
Complete and send t	higoliff, legether wit	h applicable fo	Commissioner P.O. Box 1450	Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450				
•	APR 1 2 2006		or Fax	(571) 273-2885	_			
INSTRUCTIONS: This to appropriate. All further co- indicated unless corrected	rm should be used tran respondence including the leading or directed otherwise	smitting the ISSU Patent, advance or in Block 1, by (a	E FEE and PUI ders and notifica ) specifying a ne	BLICATION FEE (if rection of maintenance fees we correspondence address	quired). Blocks I through 5 s will be mailed to the current ss; and/or (b) indicating a sep	hould be completed where correspondence address as arate "FEE ADDRESS" for		
CURRENT CORRESPONDENCE 32172 7.	TE ADDRESS (Note: Use Block I for 590 01/24/2006 APIRO MORIN & C	any change of address)		Note: A certificate of Fee(s) Transmittal. papers. Each addition have its own certific	of mailing can only be used f This certificate cannot be used onal paper, such as an assignm ate of mailing or transmission.	or domestic mailings of the for any other accompanying ent or formal drawing, must		
	F THE AMERICAS (6		I hereby certify that	Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.				
,						(Depositor's name)		
						(Signature) (Date)		
APPLICATION NO.	FILING DATE		FIRST NAMED IN	IVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.		
10/771,732	02/04/2004		Ralph Her		NG613.0001	4040		
TITLE OF INVENTION: D	DISPLAY STRUCTURE FO	R GEMSTONES A	ND THE LIKE					
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE		
nonprovisional	NO	\$1400		\$300	\$1700	04/24/2006		
EXAM	MINER	ART UNIT		CLASS-SUBCLASS	<b></b>			
JOHNSON,	JERROLD D	3728		206-100000	<b>-</b>			
1. Change of correspondence CFR 1.363).  Change of corresponded CFR 1.363).  Change of corresponded CFR 1.363).  The change of corresponded CFR 1.363.  The change of correspondence CFR 1.363.	Correspondence	2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
3. ASSIGNEE NAME AND	RESIDENCE DATA TO B	E PRINTED ON T	L THE PATENT (n	rint or type)				
PLEASE NOTE: Unless recordation as set forth in	s an assignee is identified be n 37 CFR 3.11. Completion	elow, no assignee of this form is NO	data will appear I a substitute for	on the patent. If an assi	gnee is identified below, the o			
(A) NAME OF ASSIGN	EE	(8	) RESIDENCE:	CITY and STATE ORC 01 FC 02 FC 03 FC	: 1581 : 1584	1460.00 OP 300.00 OP 30.00 OP		
Please check the appropriate	e assignee category or catego	ries (will not be pr	inted on the pater		Corporation or other private gr			
4a. The following fee(s) are	enclosed:	41:	. Payment of Fee	e(s):				
Issue Fee				he amount of the fee(s) is				
Publication Fee (No s	•	Payment by credit card. Form PTO-2038 is attached.						
Advance Order - # o	f Copies		The Directo Deposit Accoun	r is hereby authorized by it Number <u>50.2</u>	charge the required fee(s), or (enclose an extra	credit any overpayment, to copy of this form).		
5. Change in Entity Status	(from status indicated above				•			
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).								
The Director of the USPTO NOTE: The Issue Fee and P interest as shown by the rec	is requested to apply the Issue Publication Fee (if required) order of the United States Pate	ue Fee and Publica will not be accepted ent and Trademark	tion Fee (if any) I from anyone of Office.	or to re-apply any previou her than the applicant; a re-	usly paid issue fee to the applic egistered attorney or agent; or	ation identified above. the assignee or other party in		
	4/ . / ~ 1	76100.	^			1 2006		

**Authorized Signature** 

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Registration No.

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	Complete if Known											
Fees pursuant to the collection App	18).	Complete if Known Application Number 10/771,732-Conf. #4040										
FEE TRANSMITTAL For FY 2006				Filing Date	ibei	February 4, 2004						
				First Named Inv	entor	Ralph Herzog						
	_	Examiner Name		J. D. Johnson								
Applicant claims small entity s		Art Unit 3728										
TOTAL AMOUNT OF PAYMENT (\$) 1,730.00				Attorney Docket	No.	N6613.0001						
METHOD OF PAYMENT (check all that apply)												
Check x Credit Card Money Order None Other (please identify):												
Deposit Account Deposit Account Number: 50-2215 Deposit Account Name: Dickstein Shapiro Morin & Oshinsky LLP												
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)												
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing												
Charge any additional fee(s) or underpayment of x Credit any overpayments												
fee(s) under 37 CFI			or	n filing or may	he subi	ect to a surcha	rge )					
1. BASIC FILING, SEARCH, AND			<u>.po.</u>	· ·······g or ·····ay	DO GUD,	301 10 4 04/0/14	190.7					
, , , , , , , , , , , , , , , , , , , ,	FILING F		SEA	ARCH FEES	EXAMI	NATION FEES						
Application Type Fee		nall Entity Fee (\$) Fe	e (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees I	Paid (\$)				
	)() 구축도 :		500	250	200	100	10031	<u>αια (ψ)</u>				
Design 20			00	50	130	65						
Plant 20			300	150	160	80						
Reissue 30			500	250	600	300						
Provisional 20		100	0	0	0	0						
2. EXCESS CLAIM FEES	· ·	100	•	v	Ū	V		Small Entity				
Fee Description							Fee (\$)	Fee (\$)				
Each claim over 20 (including Re				50	25							
Each independent claim over 3 (in				200	100							
Multiple dependent claims							360	180				
Total Claims Extra Claims	Fee	(\$) F	ee P	aid (\$)	<u>N</u>	<b>Multiple Dependent Claims</b>						
35 - 35 =					<u>F</u>	<u>ee (\$)</u> F	ee Paid (\$	<u>એ</u>				
HP = highest numer of total claims paid												
Indep. Claims Extra Claims  4 -4=	x Fee	<u>(\$)</u> _ F	ee P	'aid (\$)								
HP = highest numer of independent clair		if greater than 3.		,								
3. APPLICATION SIZE FEE								_				
If the specification and drawings												
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).												
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)												
100 = /50 (round <b>up</b> to a whole number) x =												
4. OTHER FEE(S)	120 for (-	a a amaall amtituu	d:				Fees	Paid (\$)				
Non-English Specification, \$130 fee (no small entity discount)  Other (o.g., late filing surcharge): 1501 Utility issue fee 1,400.00												
1504 Publication fee for early, voluntary, or normal 300.00												
8001 Printed copy of patent w/o color 30.00												
SUBMITTED BY () () ()												
Signature Sucha	0	Calduc	$\subseteq$	Registration No. (Attorney/Agent)	41,135	Telephone	(212) 89	6-5484				
Name (Print/Type) Richard LaCav	<del></del>					Date	April 11	. 2006				